

House File 632

H-1238

1 Amend House File 632 as follows:

2 1. Page 5, after line 31 by inserting:

3 <Sec. _____. Section 505.26, Code 2015, is amended by
4 adding the following new subsection:

5 NEW SUBSECTION. 7. *a.* If a health carrier or
6 pharmacy benefits manager fails to use or accept the
7 prior authorization form that has been approved for
8 use by the health carrier or pharmacy benefits manager
9 pursuant to this section, or to respond to a health
10 care provider's request for prior authorization of
11 prescription drug benefits within seventy-two hours of
12 the health care provider's submission of the form, the
13 request for prior authorization shall be considered to
14 be approved.

15 *b.* However, if the prior authorization request is
16 incomplete or additional information is required, the
17 health carrier or pharmacy benefits manager may request
18 the additional information within the seventy-two-hour
19 period and once the additional information is submitted
20 the provisions of paragraph "a" shall again apply.

21 *c.* Notwithstanding paragraphs "a" and "b", the
22 commissioner may develop, by rule, minimum time periods
23 for a health carrier or pharmacy benefits manager to
24 respond to a health care provider's request for prior
25 authorization of prescription drug benefits or for
26 additional information, that are less than, but in no
27 case exceed seventy-two hours, as the commissioner
28 deems appropriate under the circumstances.>

29 2. By renumbering as necessary.

L. MILLER of Scott